

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	3		
O.I.P.E. CLASSIFIER	SM	7086U	17-11-01 8/20/01
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
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16	✓
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18	✓
19	✓
20	✓
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Claim	Date
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If more than 150 claims or 10 actions  
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